

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE  
UTILITY PATENT APPLICATION TRANSMITTAL

FIRST NAMED INVENTOR OR APPLICATION IDENTIFIER: Volk rt A. Zeijlemaker  
TITLE: CONTROLLING TELEMETRY DURING MAGNETIC RESONANCE IMAGING

CERTIFICATE UNDER 37 CFR §1.10: I hereby certify that this Utility Patent Application Transmittal and the documents referred to as enclosed therein are being deposited with the United States Postal Service, in an envelope addressed to: Mail Stop Patent Application, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450, \*EXPRESS No. EV 323 971 996 US, on this 29<sup>th</sup> day of September, 2003.

17858 U.S.P.T.O.  
10/673934  
09/30/03

Laurie L. Gruba

Printed Name

Signature

MAIL STOP PATENT APPLICATION  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

We are transmitting herewith the attached:

Patent Application Transmittal

Specification:

Total pages: 26 (including claims and abstract: Spec. 19 sheets; Claims 6 sheets; Abstract 1

Drawings:

Total sheets: 6

formal       informal

Combined Declaration and Power of Attorney:

unexecuted

copy from prior application

Deletion of Inventor(s) - Signed statement attached deleting inventor(s) named in the prior application (37 CFR 1.63(d)(2) and 1.33(b))

Incorporation by Reference - *The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied above is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.*

Accompanying application parts:

Notification of filing a

Assignment of the Invention to Medtronic, Inc.

Assignment cover sheet

Information Disclosure Statement

PTO Form 1449

Copies of IDS citations

Preliminary Amendment

A copy of the Petition or Conditional Petition for Extension of Time in the prior application.

Return Postcard

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IF A CONTINUING APPLICATION:

Continuation       Divisional       Continuation-in-part (CIP) of prior application  
No. .

Amend the specification by inserting before the first line the sentence: --This application is a \_\_\_\_\_ of  
application Serial No. \_\_\_\_\_, filed \_\_\_\_\_, now allowed.--

Canc l in this application original claims \_\_\_\_\_ of the prior application befor calculating the filing fee.  
(At least the riginal independent claim must be retain d for filing purpos s.)

The prior application is assigned f record t Medtronic, Inc.

The Power of Attorney in the prior application is to: \_\_\_\_\_

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- This application claims the benefit of U.S. Provisional Application(s) Serial No.(s) \_\_\_\_\_, filed \_\_\_\_\_.
- Address all future correspondence to: Girma Wolde-Michael, Reg. No. 36,724  
Telephone: (763) 514-6402  
No. 27,581

FEE CALCULATION	No. of Claims Filed	Claims Included in Base Fee	No. of Extra Claims	Rate	Fee
Total Claims	28	20 = 8		x 18	144.00
Independent Claims	9	3 = 6		x 84	504.00
Multiple Dependent Claims			0	+ 280	
Basic Filing Fee					\$750.00
				TOTAL	1398.00

- Charge Deposit Account No. 13-2546 in the amount of \$1398.00 for the filing fee.
- The Commissioner is hereby authorized to charge any fees which may be required under 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 13-2546. A duplicate of this transmittal is enclosed.

09/29/03  
Date

  
Girma Wolde-Michael, Reg. No. 36,724  
Telephone: (763) 514-6402  
No. 27581